DOCUMENT # N9600002121

## FILED Mar 06, 2002 8:00 am g Secretary of State

OAKBRIC	DGE PROPERTY OWNERS A	ASSOCIATION, INC.		03-06-2002 90026 031 ****61.25		
Principal Place of Business Mailing Addres						
SW 31ST AVENUE DANIA FL 33312		THE CONTINENTAL GRO 2950 N 28TH TERRACE HOLLYWOOD FL 33020 US	up, Ltd.			
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
City & State		City & State		4. FEI Number Applied For Not Applica		
Zip	Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required		
	6. Name and Address of Currer	t Registered Agent		7. Name and Address of New Registered Agent		
		<u> </u>	Nam			
BECKER & POLIAKOFF, PA 3111 STIRLING ROAD			Stree	Street Address (P.O. Box Number is Not Acceptable)		
FORT LAUDERDALE FL 33312						
TONT CAU	DENDALL   L 33312		City	ty FL Zip Code		
SIGNATURE _	Signature, typed or printed name of registered age	9. Election C	OTE: Registered Agent si ampaign Financin d Contribution.	cing \$5.00 May Be Added to Fees Department of State		
10.	OFFICERS AND D		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
	D TAYLOR, CONRAD 3135 SW 50 ST	🗖 Delete	TITLE NAME STREET ADDRE CITY-ST-ZIP	14800 SW 32ND LEKKACE		
	<u>Fort Lauderdale FL 33312</u> P	<b>▼</b> Delete	TITLE	DANIA FC 33312 Change MAddit		
STREET ADDRESS	FLANNERY, MICHAEL 3120 SW 49TH STREET DANIA FL 33312		STREET ADDRE	HOUG SW SAND TERRACE		
TITLE NAME	S MURPHY, THOMAS 4963 SW 32ND AVENUE DANIA FL 33312	<b>⊠</b> Delete	TITLE NAME STREET ADDRE	B/D Change MAdditi LIPSITZ, MICHAEL A975 SW 32ND AVENUE		
STREET ADDRESS	T Wagner, Patty 4933 SW 32ND Terrace Dania Fl 33312	<b>⊠</b> Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	16.62 20 0 (31 100,0400		
TITLE NAME STREET ADDRESS	D GUILLERMO, GARCIA 4927 SW 31ST TERRACE DANIA FL 33312	□ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	D/VP Change Addition AULLERMO, GARCIA  AGAIN SW 31ST TERRACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	D Change MAddition Change MAddition Change MAddition Change MADDITION CONTROL CHANGE MADDITION CHANGE CHANGE MADDITION CHANGE MADITION CHANGE MADITION CHANGE MADITION CHANGE MADDITION CHANGE MADDITION CHANGE MADITION CHANGE MADDITION CHANGE MADDITION CHANGE MAD		

I nereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attact the report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attact the report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attact the report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed in the report of the receiver of t